

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>E.H.</i>	<i>45</i>	<i>5/5</i>
O.I.P.E. CLASSIFIER	<i>for</i>	<i>720</i>	<i>06-19-01</i>
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	4	12/04
2	✓	1	12/04
3	✓	3	12/04
4	✓	24	12/04
5	✓		
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50	✓		

Claim	Final	Original	Date
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Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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10/11/01  
5/11/01